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FACSIMILE TRANSMISSION**CONFIDENTIAL**

DATE: November 8, 2004

CLIENT NO.: 24498

To:

NAME	FAX NO.	PHONE NO.
Commissioner for Patents - USPTO	(703) 872-9306	

FROM: Robert A. Hulse, Reg. No. 48,473 PHONE: (415) 875-2444

NUMBER OF PAGES WITH COVER PAGE: 10

ORIGINAL WILL NOT FOLLOW

MESSAGE:

Attached are Revocation and Substitute Power of Attorney forms in the following applications/patents:

10/861,816 10/384,374
60/583,834
6,271,917
6,388,794
09/869,371
10/062,607
09/848,614

CAUTION - CONFIDENTIAL

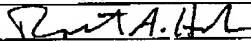
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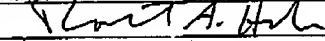
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24498/09463/SE/5131797.1

0001/PTO Rev. 10/85	U.S. Department of Commerce Patent and Trademark Office	Application Number	N/A
TRANSMITTAL FORM <i>(to be used for all correspondence during pendency of filed application)</i>		Filing Date	N/A
		First Named Inventor	N/A
		Examiner	
		Group Art Unit	
Total Number of Pages in This Submission	9	Attorney Docket Number	

ENCLOSURES (check all that apply)	
<input type="checkbox"/> Fee Transmittal Form (in duplicate) <input type="checkbox"/> Check Enclosed <input type="checkbox"/> Return Receipt Postcard <input type="checkbox"/> Response to Notice to File Missing Parts <input type="checkbox"/> Assignment & Recordation Cover Sheet <input type="checkbox"/> Declaration <input type="checkbox"/> Power of Attorney <input type="checkbox"/> Application Data Sheet <input type="checkbox"/> Information Disclosure Statement & PTO/SB/08A <input type="checkbox"/> Copies of IDS Cited References <input type="checkbox"/> Request for Corrected Filing Receipt <input type="checkbox"/> Request for Correction of Recorded Assignment <input type="checkbox"/> Amendment/Response: [] Page(s) <input type="checkbox"/> After Final <input type="checkbox"/> Status Request <input type="checkbox"/> Request to Withdraw as Attorney or Agent in Application Nos.	<input checked="" type="checkbox"/> Revocation and Substitute Power of Attorney 10/881,816 60/583,834 6,271,917 6,388,794 09/889,371 10/062,607 09/848,614 10/384,374
REMARKS:	

SIGNATURE OF ATTORNEY OR AGENT			
Signature:			
Attorney/Reg. No.:	Robert A. Hulise, Reg. No. 48,473	Dated:	November 8, 2004

CERTIFICATE OF FACSIMILE TRANSMISSION			
I hereby certify that this correspondence, including the enclosures identified above, is being transmitted on the date shown below via facsimile to: Commissioner for Patent the facsimile number indicated below.			
Signature:			
Typed or Printed Name:	Robert A. Hulise	Dated:	November 8, 2004
Facsimile Number:	1-703-872-9308		

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**REVOCATION OF POWER OF
ATTORNEY AND NEW POWER OF
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Application Number	09/869,371
Filing Date	February 26, 2002
First Named Inventor	Thomas W. Hagler
Art Unit	2877
Examiner Name	Zandra V. Smith
Attorney Docket Number	24498-09459

I hereby revoke all previous powers of attorney or authorizations of agent given in the above-identified application, and I hereby appoint:



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OR



Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address to, and associate the above-identified application with:



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I am the:



Applicant/Inventor.



Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name

Paul Salsgiver

Title

President and CEO

Signature

Date

11/5/04

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ *Total of One form is submitted.

24498/09459/SE/5131196.1